## DEST AVAILABLE COPY

\$ pr								Application or Docket Number					
• '	PATENT AF	PLICATIO Effecti	D	09/693/45									
		CLAIMS AS	(Column 1) (Column			nn 2)	_	SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS								RATE	FEE		RATE '	FEE	
FOR			NUMBER FILED NUM			ER EXTRA	BASIC FEE		355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2 0 minus 20=					X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 =				1	X40=		OR	X80=		
MUL	TIPLE DEPEND	ENT CLAIM PI	RESENT				Ī	+135=		OR	+270=		
* If 1	he difference ir	column 1 is	less than zer	o, ente	r "0" in c	olumn 2	L	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART								SMALL E	·	OR	OTHER SMALL E		
		(Column 1) CLAIMS		_	mn 2) HEST	(Column 3)	Г	SMALL	ADDI-		OMACC	ADDI-	l
¥ <u></u>		REMAINING AFTER		NUN	MBER OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
AMENDMENT	Total	AMENDMENT 1	Minus	·· 2	FOR	=	ł	X\$ 9=	1 55	OR	X\$18=		
MEN	Independent i	. 3	Minus	***	3	=	l	X40=		OR	X80=		1
Ā	FIRST PRESEN	ITATION OF M	ULTIPLE DEP	ENDEN	T CLAIM		l	+135=		OR	+270=		١
								TOTAL		OR	TOTAL		1
					-	(0-1 A)	,	ADDIT. FEE		JUN	ADDIT. FEE	<u> </u>	1
	BE 429, MACHINES CONTRACTOR	(Column 1) CLAIMS			umn 2) HEST	(Column 3)	Г		ADDI-	1		ADDI-	1
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER MOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
DME	Total	- 18	Minus	** 6	20	= -		X\$ 9=		OR	X\$18=		
MEN	Independent	. 3	Minus	*** 6	3	= -		X40=		OR	X80=		
Ľ	FIRST PRESEN	NTATION OF M	IULTIPLE DEF	PENDEN	NT CLAIN			+135=		OR	+270=		۱
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		1
		(Column 1)		(Col	umn 2)_	(Column 3)		AUDIT. FEE					ı
AMENDMENT C	THE SHOP STATE	CLAIMS	F-8-4-5-4	HIC	SHEST IMBER	PRESENT			ADDI-	1		ADDI-	
	· · · · · · · · · · · · · · · · · · ·	REMAINING AFTER AMENDMENT		PRE	VIOUSLY ID FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAI FEE	
	Total	*	Minus			=		X\$ 9=		OR	X\$18=		1
	Independent	•	Minus	***		=		X40=		OF	X80=		
	FIRST PRESE	NTATION OF I	MULTIPLE DE	PENDE	NT CLAI	<b>и</b>	j			1		1 -	٦
		41-1 41	the enter in each	umn 2 ···	ni "N" afin	column 3.		+135= TOTAL	<b> </b> -	OR	TOTAL		4
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE										ADDIT. FE	<u> </u>	4	
"	"If the "Highest Nu The "Highest Nun	mber Previously nber Previously f	Paid For" IN TH Paid For" (Total o	or Indepe	endent) is t	he highest numb	er 10	ound in the a	ppropriate b	ox in (	column 1.		